Please type a plus sign inside this	s box + PTO	/SB/01 (1	2/97) App	roved for us	e through (09/30/00,	OMB 0651-00)32 +	
DECLARATIO		ILITY	OR	Attorney I	Oocket Nur	nber 04	645.0842		
	ESIGN APPLICAT	MOL		First Named Inventor		r Ga	Gan et al.		
(37)	COMPLETE IF KNOWN								
<.				Application Number					
Submitted OR Submitted With Initial		eclaration ubmitted afte	ter Initial	Filing Dat	e		11/13/01		
	Fili	ng (surch	arge	Group Art	Unit				
Filing		uired)	o(e))	Examiner Name					
As a below named inventor, I	hereby decla	re that:		<u>t</u>		L			
My residence, post office addre	-		as stated below r	next to my n	ame.				
•		•		-		:	1:::	(:fl	
I believe I am the original, first names are listed below) of the	and sole inve subject matter	ntor (1f or which is	oly one name is light claimed and for	which a pate	or an orige ent is sough	tht on the inve	ention entitled:	(ii piurai	
Pellet Process For Double Curr	ent Collector	Screen Ca	athode Preparation	on					
<u> </u>									
The specification of which			(Title of the In	vention)					
OR STATE									
is attached hereto OR was filed on (MM/DD/YY	YYY)		a	s United Sta	tes Applic آ	ation Numbe	r or PCT Intern	ational	
Application Number and was amended on (MM/DD/YYYY) (if applicable).									
I hereby state that I have review			contents of the	above identi	fied specif	ication, inclu	ding the claims	, as amended	
by any amendment specifically	referred to at	oove.							
Tacknowledge the duty to disc	lose informati	on which	is material to pa	tentability a	s defined i	n 37 CFR 1.5	56.		
Thereby claim foreign priority	benefits under	r 35 U.S.	C. 119(a)-(d) or 3	365(b) of an	y foreign a	application(s)	for patent or in	iventor's	
eertificate, or 365(a) of any PC America, listed below and have									
or of any PCT international ap	plication havii	ng a filing	date before that	t of the appl	ication on	which priorit	y is claimed.	·	
Prior Foreign Application			Foreign Fili				Certified Copy Attached? YES NO		
(Numbers)	Countr	У	(MM/DD/Y	YYY)	Not C	Liaimed	YES	NO	
								_ _	
		<u></u>						0	
□ Additional foreign applica	tion numbers	are listed	on a supplement	al priority d	ata sheet P	TO/SB/02B	attached hereto		
I hereby claim the benefit under	er 35 U.S.C. 1	19(e) of a	ny United States	s provisiona	l application	on(s) listed be	elow.		
Application Numbe	r(s)	F	iling Date (MM	TDD/YYYY)					
60/252,161		11/17/2	000	□ Addit			tional provisional application		
							numbers are listed on a supplemental		
						priority data sheet PTO/SB/02B attached hereto.			
						attached	hereto.	,	

+

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, 1 acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filling date of the prior application and the national or PCT international filling date of this application.

U.S. Parent Application or PCT Parent Number				Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)					
المنافذة ٨		T internati	one landi	cation wymham	ara ligrad on		antal majorit	y data sheet PTO	/SB/02B attached h	ereto		
1												
the Patent	a inventor, i i and Tradema	nereby app rk Office	connecte	ionowing regi d therewith:	istereo prac	amoner(s) to prosect	tte tins applicati	ion and to transac	E ATT DUSINESS IN		
□ Custome	r Number								P2 C	tomer Number		
OR						<u> </u>		→		iomer Numper e Label Here		
■ Registen	■ Registered practitioner's name/registration number listed below					}						
	Name			Registrat	Registration No.		Ŋ	ame	Registration No.			
Michael F.	Scalise			34,920		R. Ken	t Roberts		40,786			
	anjana Kadle			40,041		John M. Del Vecchio			42,475			
	Martin G. Linihan		24,926			J. Tracy		42,187				
Daniel D	Kevin D. McCarthy David L. Principe		35,278 39,336	35,278		C. Oliverio T. Bean, Jr		33,435 16,639				
iL		practitione	(v) named		al Registere		<u> </u>		3/02C attached here	to.		
				ner Number	ar registerer	a i racindo						
Direct all correspondence to: Customer Number or Bar Code Label						OR ■ Corre			espondence address below			
Name	Michael F.	Scalise										
Address	Hodgson R	uss LLP						<u> </u>				
Address	One M&T	Plaza, Şui	te 2000									
City	Buffalo	State			State	Ne	w York	ZIP	14203-2391			
Country	United State	tes Telephone (7)		1 '	16) 856-4000			(716) 849-0349				
are believe made are p	d to be true; a	and further fine or im	r that the prisonme	se statements ent, or both, w	were made	with the	knowledge	that willful fals	nade on informati se statements and statements may j	the like so		
Name of S	ole or First I	inventor:			□ A pet	ition has	been filed	for this unsigne	d inventor			
	Given Name (first and middle [if any])					Family Name or Surname						
Hong						Gan						
Inventor's Signature	Inventor's Signature			-, ->	5				Date	11-12-01		
Residence: City East Amherst		State	NY		Country	USA	Citizenship	USA				
Post Office	Address	22 Odes	sa Court			<u>-</u>			 			
Post Office	e Address				·		·					
City		East Am	herst	State	NY		ZIP	14051	Country	UŞA		

L.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

 $\rightarrow \rightarrow \rightarrow$ HODGSON

Name of Additional J	oint Inventor, if any:			□ A pet	ition has bee	n filed for thi	is unsigned invento	T			
Given N	any])	· · · · · · · · · · · · · · · · · · ·	Family Name or Surname								
Sally Ann					Smesko						
Inventor's Signature	-		, , , , , , , , , , , , , , , , , , ,				Date				
Residence: City	North Tonawanda	State	NY		Country	USA	Citizenship	USA			
Post Office Address	396 Hewitt Street		<u>.</u>		L	L					
Post Office Address			~ <u>~~~</u>								
City	North Tonawanda	State	NY		ZIP	14120	Country	USA			
Name of Additional J	oint Inventor, if any:			□ A pet	ition has bee	n filed for thi	s unsigned invento	ř			
Given No.	Given Name (first and middle [if any])					Family Name or Surname					
Esther S.				Takeu	chi						
Inventor's Signature Residence: City	Ester "	5 (<u></u>	el	~		Date	11-9-01			
Residence: City	East Amherst	State	NY		Country	USA	Citizenship	USA			
Post Office Address	38 San Rafacl Court	·•									
Post Office Address											
City	East Amherst	State	NY		ZIP	14051	Country	UŠA			
Name of Additional J	oint Inventor, if any:			n A peti	tion has beer	i filed for this	unsigned inventor				
Given Nz	Given Name (first and middle [if any])			Family Name or Surname							
Inventor's Signature			<u> </u>				Date				
Residence: City		State			Country		Citizenship				
Post Office Address		<u> </u>									
Post Office Address								,,			
City		State			ZIP		Country				

+